



Recreation Department

Program Registration Form

Participant Information (Please Print):

| | | | |
|-------------------------|--------|------------------------------------|--|
| Last Name: | | First Name: | |
| Street Address: | | | |
| City: | State: | Zip: | |
| Date of Birth: | Age: | Sex (Circle One): M or F | |
| Home Phone: | | Work Phone: | |
| Email: | | | |
| Emergency Contact Name: | | Emergency Contact Phone: | |

Parent/Guardian Contact Information - Required if participant is under the age of 18 (Please Print):

| | |
|-------------|-------------|
| Last Name: | First Name: |
| Home Phone: | Work Phone: |

Program Registration Information (Please Print):

| Program Registration Information (Please Print): | | | (Office Use Only) | | |
|--|---------------|------|-------------------|------|----------------------|
| Program Code #: | Program Name: | Fee: | Check # Cash | Date | Employee Initials |
| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 5. | | | | | |
| 6. | | | | | |

NOTICE:

Please read and sign the legal terms on the back. They include a release of the City of Frisco for its own negligence. If you fail to do so you will be disqualified from participating in any programs if the City of Frisco is aware of the failure to sign.



Recreation Department

Program Waiver / Release Form

RELEASE

To assist you in participating in recreational activities, the City of Frisco (sometimes referred to as "the City") has agreed to make available to those signing this release certain activities, services and facilities. However, the City intends to make activities, services and facilities available only to those signing the release below. **Please carefully read the release to understand its terms. It includes a release of claims against the City of Frisco, including a release of claims caused by the negligence or strict products liability of the City.** It involves the release of possible legal rights you may otherwise have in the future. **If you participate in any programs offered by the City without signing below, it is without the knowledge of the City and you are deemed to have accepted these terms by participating. If you do not agree to these terms, do not participate. This release shall have not expire or terminate until you have notified the City in writing of your desire to terminate the same.** (The intent being to allow you to participate in as many activities, services and facilities as possible without requiring that you repetitively execute additional releases.) You may notify the City of your intent to withdraw this release and no longer participate in any activity, service or facility of the City by writing: The City of Frisco Parks and Recreation, Attn: Release of Waiver, 6726 Walnut Street, Frisco, Texas 75034. Noone has authority to waive the requirement that you sign this release to participate. Please carefully read and sign the Medical Consent and Release of Liability below:

I hereby agree to authorize the program directors, volunteers, instructors, City employees, agents and/or representatives as my Agents to consent to Medical, Surgical, and/or Dental examination, in addition to any and all other Treatments that may be deemed necessary by medical personnel. It is understood that the activities I wish to participate in involve an element of risk and a danger of accidents and knowing those risks I hereby assume those risks.

In consideration of the **City of Frisco ("the City")** allowing me to participate in City sponsored activity(ies) and other good and valuable consideration, the receipt of which is acknowledged, **I, on behalf of myself, my heirs, assigns and any other person or entity claiming to have legal rights by and through me, hereby release and agree to defend, indemnify, and hold harmless the City of Frisco, including any of its agencies or Departments, including the City of Frisco Parks and Recreation and/or City of Frisco Police Department or Fire Department, from any and all claims of liability or liability for personal injury (including death), property damage or wrongful death, resulting from, relating to, or arising out of participation in any program sponsored, advertised or supported, in any way, by the City of Frisco, transportation to or from any activities in which I desire to participate, transportation by the City of Frisco, any other services offered by the City of Frisco, and/or the use of any facilities of the City of Frisco, including, but not limited to, a release of any claims or liability due to the negligence or contributory negligence of the City of Frisco and/or strict products liability of the City of Frisco.** I understand that the City of Frisco does not waive any immunity.

I agree that if a Court determines that any part of this release is not effective with regard to any particular activity, service or facility, it shall not affect the validity of this release in any other way. I further agree that if a Court determines that any portion of this document is unenforceable it shall not affect the ability of the City of Frisco to enforce the remainder.

I agree that pictures taken during program hours may be used for future promotional purposes. I understand that The City of Frisco may not provide health and/or accident insurance for participants.

I warrant by my signature that I am authorized to sign this release. I further agree to indemnify and defend the City of Frisco if I am not authorized to sign and legally bind the individual named herein to the terms of this agreement.

Signature

Print Name

Date